

Report Period # 3

Office (if applicable)

District (if applicable)

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PAGE 2 OF 4

MESQUITE VOTERS AWARENESS

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
DESERT VALLEY TIMES 12 W. MESQUITE BLVD. #114 MESQUITE, NV 89027	D	11-5-02	\$ 471.90
BILL NICHOLAS P.O. BOX 3305 MESQUITE, NV 89024.	D	11-25-02	\$ 296.25

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CAMPAIGN EXPENSES

Report Period **#3**Name (print) MESQUITE VOTERS AWARENESS

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**